



Corporate Environmental Engineering Department

GAF

March 4, 1982

United States Environmental
Protection Agency
Region II
Sites Notification
26 Federal Plaza
New York, New York 10007

Reference: Superfund Site Notification,
GAF Corporation, Linden Facility

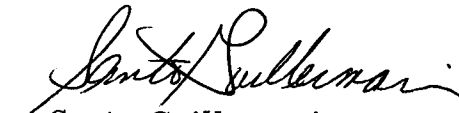
Gentlemen:

Enclosed please find the completed Superfund Site Notification form
for our Linden, New Jersey facility as requested.

If there are any questions I can be reached at (201) 628-3170.

Very truly yours,

GAF CORPORATION


Santo Guillermain

cc: W. Machado, GAF Corporation



Notification of Hazardous Waste Site

United States
Environmental Protection
Agency
Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

Reference No. NJS 000 001 281

A Person Required to Notify:

Enter the name and address of the person or organization required to notify.

Name GAF Corporation
Street 140 West 51st Street
City New York State N. Y. Zip Code 10020

B Site Location:

Enter the common name (if known) and actual location of the site.

Name of Site GAF Corporation
Street Foot of South Wood Avenue (P. O. Box 12)
City Linden County Union State N. J. Zip Code 07036

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) Grier, Andres - Plant Engineer
Phone (201) 862-2600 Extension 275

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) Early 1930's to (Year) 1973 (See details under I, below)

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I—Description of Site.

General Type of Waste:

Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.

1. ☒ Organics
2. ☒ Inorganics
3. ☒ Solvents
4. ☐ Pesticides
5. ☒ Heavy metals
6. ☒ Acids
7. ☐ Bases
8. ☐ PCBs
9. ☐ Mixed Municipal Waste
10. ☐ Unknown
11. ☐ Other (Specify)

Source of Waste:

Place an X in the appropriate boxes.

1. ☐ Mining
2. ☐ Construction
3. ☐ Textiles
4. ☐ Fertilizer
5. ☐ Paper/Printing
6. ☐ Leather Tanning
7. ☐ Iron/Steel Foundry
8. ☒ Chemical, General
9. ☐ Plating/Polishing
10. ☐ Military/Ammunition
11. ☐ Electrical Conductors
12. ☐ Transformers
13. ☐ Utility Companies
14. ☐ Sanitary/Refuse
15. ☐ Photofinish
16. ☐ Lab/Hospital
17. ☐ Unknown
18. ☐ Other (Specify)

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:

EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

F Waste Quantity:

Place an X in the appropriate boxes to indicate the facility types found at the site.

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.

In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.

Facility Type

1. ☐ Piles
2. ☐ Land Treatment
3. ☒ Landfill
4. ☐ Tanks
5. ☐ Impoundment
6. ☐ Underground Injection
7. ☐ Drums, Above Ground
8. ☐ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount

cubic feet Unknown

gallons _____

Total Facility Area

square feet _____

acres 12

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment. _____

☐ Known ☐ Suspected ☐ Likely ☐ None

Note: Items H and I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

- 1) See drawing B4622-9, 4/3/69 by Wheeler (attached)
- 2) Plant Site = 125.429

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

- 1) Material buried at site marked "A" on accompanying map from the early 1930's until 1970.
- 2) In 1970, under the new regulations of Chapter VIII of the State Sanitary Code, GAF applied for and received authorization to operate a sanitary landfill site at location "B" on the accompanying map. (Certificate of Registration #20322001 dated July 24, 1970). This operation was terminated at the request of the State in June of 1973. Since then all wastes have been sent off site for disposal.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name Waldo Machado, Plant Manager

Street P. O. Box 12

City Linden, State N. J. Zip Code 07306

Signature *Waldo Machado*

Date 3/1/82

- ☒ Owner, Present
☐ Owner, Past
☐ Transporter
☐ Operator, Present
☐ Operator, Past
☐ Other

EPA Notification Hazardous Waste Site

United States
Environmental Protection
Agency
Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

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P/0610 NJS 000 001 281

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Name GAF Corporation
Street 140 West 51st Street
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Name of Site GAF Corporation - Linden Plant
Street Foot of South Wood Avenue
City Linden County Union State NJ Zip Code 07036

NJD002185973

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) Freeman, Arthur
Phone (201) 862-2600 Extension 227

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) _____ To (Year) _____

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Source of Waste:

Place an X in the appropriate boxes.

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6. ☐ Leather Tanning
7. ☐ Iron/Steel Foundry
8. ☐ Chemical, General
9. ☐ Plating/Polishing
10. ☐ Military/Ammunition
11. ☐ Electrical Conductors
12. ☐ Transformers
13. ☐ Utility Companies
14. ☐ Sanitary/Refuse
15. ☐ Photofinish
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cubic feet _____

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Total Facility Area

square feet _____

acres _____

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J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name _____

Street _____

City _____

State _____

Zip Code _____

Signature _____

Date _____

- ☒ Owner, Present
☐ Owner, Past
☐ Transporter
☐ Operator, Present
☐ Operator, Past
☐ Other



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION II

26 FEDERAL PLAZA

NEW YORK, NEW YORK 10007

per 3/8
1361 Gaps Rd
Wayne, NJ 07070

Date: JULY 21, 1981

Reference No. NJS 000 001 281

Dear Superfund Notification Respondent:

The U.S. Environmental Protection Agency (EPA) has received the information you filed pursuant to Section 103(c) of the Comprehensive Environmental Response, Compensation and Liability Act (Superfund). We are hereby returning a copy of the original document for the following reason(s):

- ☒ Essential information is missing or illegible.
Red circles indicate such items.
- ☐ It cannot be determined whether your notification was legally required or whether you were not required to report the site for which you notified.
- ☐ You failed to sign and/or date the document.
- ☒ ANY INFORMATION YOU HAVE AVAILABLE
REGARDING ITEMS D THRU G WOULD BE
APPRECIATED.

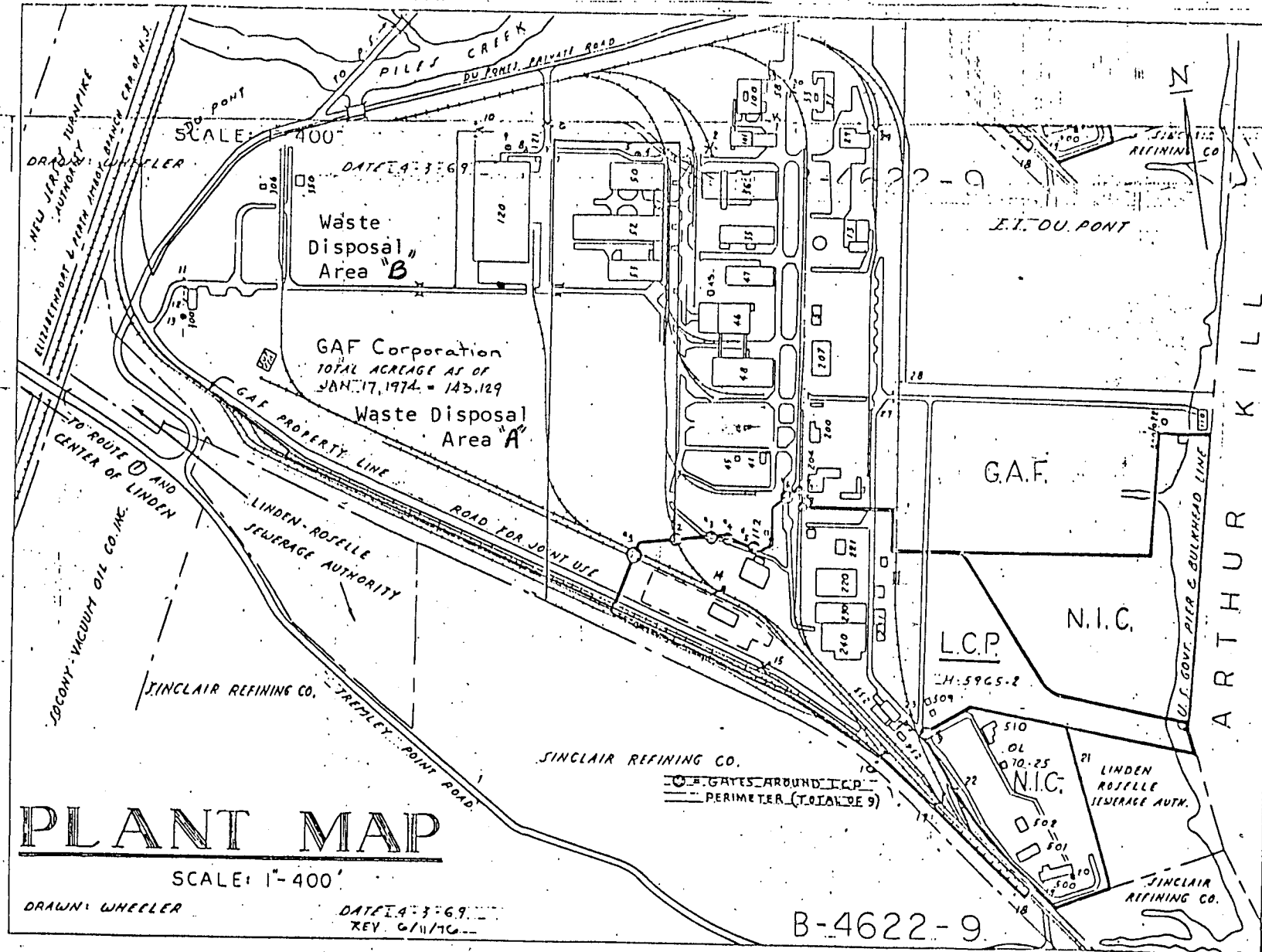
Please fill out the blank form(s) enclosed herein or insert the missing information on the enclosed copy. Return this letter, and the new form or copy no later than _____ to:

Superfund Coordinator
Information Service Center
Room 302
26 Federal Plaza
New York, NY 10278

Your notification will be regarded as late if you do not resubmit this information by the above date. If you have any questions on providing this information, please call (212) 264-3772.

Sincerely yours,


Joyce Sandholm
Superfund Coordinator



**GAF
CORPORATION**

1361 Alps Road
Wayne NJ 07470



U. S. EPA, Region II
Sites Notification
26 Federal Plaza
New York, N. Y. 10007

